	DATENT A	DDI	CATIO	מא	1	pplication	01 00	CREE INGIII	inei					
PATENT APPLICATION FEE DETERMINATION RECO Effective December 29, 1999										MQ11.		772		
									09/634 723					
CLAIMS AS FILED - PART I (Column 1) (Column 2)									ALL	ENTITY	OR	OTHER SMALL		
FÖR NUMBER FILED NUMBER EXTRA							EXTRA	,	TE	FEE	]	RATE	FEE	
ВА	SIC FEE									345.00	OR		690.00	
TOTAL CLAIMS			40 minus 20=						9=	180,00	OR	X\$18=	·	
INDEPENDENT CLAIMS			3 minus 3 =			• •			 89=	17,0160	OR	X78=		
MU	LTIPLE DEPEN	DENT	CLAIM PRESENT								UH			
* If the difference in column 1 is less than zero, enter "0" in column 2								<u> </u>	30= .		OR			
									TAL	525.5	OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							(Column 3)	SM	ALL	ENTITY	OR	OTHER SMALL		
		વ	AIMS	0 A		HIGHEST				ADDI-	]		ADDI-	
MA		A	IAINING FTER NDMENT		PF	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	R/	TE	TIONAL FEE		RATE	TIONAL	
AMENDMENT	Total	. 4	1)	Minus	**	40	= 7	XS	9=		OR	X\$18=		
REP	Independent	•	3	Minus	***	3		X:	9=	/		X78= /		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									<u> </u>	OR	X/0= /		
									30=		OR	+260=		
				•				ADDI	OTAL FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)														
AMENDMENT B		REN	AIMS IAINING FTER	1977		HIGHEST NUMBER REVIOUSLY	PRESENT EXTRA	B.A	TE	ADDI- TIONAL		RATE	ADDI- TIONAL	
			NDMENT	200		PAID FOR	EXITA			FEE			FEE	
	Total	· 🗸	4	Minus	**	40	=	X\$	9=		OR	X\$18=		
	Independent	NTATI	NOE M	Minus	ENIF	SATE CLAIM		X	9=		OR	X78 <u>-</u>		
-	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OR	+260=		
											ا م	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)								. FEE	<u> </u>	3			
ပ		CL	AIMS	<i>*</i>		HIGHEST				ADDI-	l .		ADDI-	
F		Al	IAINING FTER NDMEN!T		PF	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA	RA	TE	TIONAL FEE		RATE	TIONAL FEE	
AMENDMENT	Total	*		Minus	••		=	X\$	9= ·	rec	OR	X\$18=	ا اتافي	
ZEZ	Independent	٠		Minus	***	, -	=	-			.	X78=		
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X3	<del>y</del> =		OR	A/8=		
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+260=		
	If the "Highest Nu	mber Pr	eviously Pa	id For IN THI	S SP/	ACE is less tha	n 20, enter "20."	ADDIT	OTAL FEE		OR	TOTAL ADDIT. FEE		
"	If the Highest Nu	mber Pr	eviously Pa	aid For" IN THI	S SP/	ACE is less that nendent) is the	in 3, enter "3." highest number			propriate bo			. 7	

FORM PTO-875 (Rev. 12/99)

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